FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL									
		3235-007							
Expires:	April	30.2008							
Expires: April 30,2008 Estimated average burden									
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L	SEC USE ONLY									
	Prefix		Serial							
	DA	TE RECEIV	ED							
		1								

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
·	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
	AS SECULOS ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Web centric, Inc.	// net = 1 2005 >>
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
77 Revuelde Rd Paruament NJ 07440	
72 Reynolds Rd Pegvannock, NV 07440 Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
22 Reynolds Rd Pequa mnock, NJ 07440	receptione (value) (myrading Area Code)
	711
Address of Principal Business Operations / (Númber and Street, City, State, Zip Code) (if different from Executive Offices)	Tetephone Number (Including Area Code)
(i) unleader from Executive Offices)	
Brief Description of Business	
51761 Decomption of Datameter	
	MAGRICOED
m on the second	PROCISSED
Type of Business Organization	1
	lease specify): 0CT 13 2005
business trust limited partnership, to be formed	
Month Year	TIMONISON FINANCIAL
Actual or Estimated Date of Incorporation or Organization:	marcu
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A BAS	IC IDENTI	FICATION DATA			
2. Enter the	information re	equested for the fol	Company of the second second					
		the issuer, if the iss	-	nized within	the past five years:			
	•		_	,		of 10% or more	of a clas	s of equity securities of the issu
					rate general and ma			•
		managing partner o			6-		•	,
	, general and			-				
Check Box(es)		-	•	Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (La	st name first, i	if individual)				***************************************		
401	NE Mi	ess (Number and	ed PH 4	137	BOCA R	Paton A	= (33437
Business or Re	esidence Addre	ess (Number and	Street. City. State.	Zin Code)				
				·				
Check Box(es)) that Apply:	Promoter	Beneficial C	Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (La	st name first,	if individual)						
					•			
Business or Re	esidence Addre	ess (Number and	Street, City, State,	Zip Code)				
·			•		•			
Check Box(es) that Apply:	Promoter	Beneficial (Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (La	st name first.	if individual)						
Business or R	esidence Addre	ess (Number and	Street, City, State,	Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial (Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (1 s	ast name first,	if individual)	 					
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Business or R	esidence Addre	ess (Number and	Street, City, State,	Zip Code)				· · · · · · · · · · · · · · · · · · ·
							·. ····	
Check Box(es) that Apply:	Promoter	Beneficial (Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (La	ast name first.	if individual)						
					•			
Business or R	esidence Addre	ess (Number and	Street, City, State,	Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial (Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (La	ast name first,	if individual)		····				
		· · · · · · · ·						
Business or R	esidence Addre	ess (Number and	Street, City, State.	Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial (Owner [Executive Officer	Director		General and/or Managing Partner
Full Name (La	st name first,	if individual)		*******				

				B. 4	NFORMAT	ION ABOL	T OFFERI	NG				
L. Has the	e issuer sol	d or does t	he issuer i	ntend to se	ll to non-a	ooraditad i	nuantora i	this accoun	i o		Yes	No
1140 111	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											
2. What is the minimum investment that will be accepted from any individual?									\$10	ממא		
											Yes	No
3. Does t	he offering	permit join	t ownershi	ip of a sing	le unit?	•••••						X
commi If a per or state	ssion or sim son to be lises, list the n	ilar remune sted is an as:	ration for s sociated pe proker or de	solicitation erson or age ealer. If mo	of purchase int of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of see I with the S ed are asso	curities in t SEC and/or	irectly, any he offering, with a state ons of such		/ \
Full Name		first, if ind	ividual)							 		
Business or	Residence	Address (N	lumber and	Street Ci	ty State 7	in Code)						
Dusiness of	Residence	Audicsa (1	eanioci and	i oneci, Ci	ity, State, Z	ap Code)						
Name of As	sociated B	roker or De	aler									
States in W	hish Dans	. Y lata d 11a	- 0-11-14-1		4 - 0 - 11 - 14 1							
		s" or check										1.04-4
(Cilcon	. All State	o of check	marviaua	i States)	***************	*****************	****************	***************************************	•••••••	***************************************		States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IN IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT RI	NE SC	NV SD	NH TN	NJ TX	MM UT	NY VT	NC VA	ND WA	OH WW	OK	OR IVV	PA
	(30)	(30)	(117)		011	L <u>v</u> ()	LYAI	(WA)	WV	WI	WY	PR
Full Name	Last name	first, if ind	ividual)			- 1			·/		······································	*****
Business o	r Rasidana	Addross (Numbaran	d Street C	Sty Ctata	7in Codo)						
Dusiness o	r Kesidenci	e Andress ()	MINIOGI AN	HI SUGGE V	AIV. SIME.	7.11) C.(HE)						
Name of As	ssociated B	roker or De	aler			···						
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					·	
(Check	"All State	s" or check	individua	l States)			****************				☐ AI	l States
AL	AK	AZ	AR	[CA]	CO	CT	DE	DC	FL	GA	HI	[ID]
		IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK)	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	Last name	first. if ind	ividual)		·					· · · · · · · · · · · · · · · · · · ·		
Business o	r Residence	Address (Number an	d Street, C	ity, State,	Zip Code)						
Name of As	sociated B	roker or De	aler						······································			
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit I	Purchasers		······································				
		s" or check						***************************************			☐ Al	States
ĀL	AK	AZ	AR	CA	CO	CT	DE	DC				الك
	[N]		KS	KY)	LA)	ME	MD	MA	FL MI	GA MN	MS MS	ID MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK)	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

	7 7	
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS	411	
The state of the s		

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	; 	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s Ø	\$ Ø
	Equity	\$ 195,000	\$ 195000
	Common Preferred		
	Convertible Securities (including warrants)	\$ Ø	\$ 6
	Partnership Interests	\$ 0	\$ 0
	Other (Specify		s 6
	Total	^ 4	s 195,000
	Answer also in Appendix, Column 3, if filing under ULOE.	777	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$75,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$ 195,000
	Answer also in Appendix, Column 4, if filing under ULOE.		,
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		50IQ
			\$
	Regulation A	20400	S /AC AAD
	Rule 504		\$ 793,000
		Common	3-195,000
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		•
	Transfer Agent's Fees	\ Z	\$ 100
	Printing and Engraving Costs	······ 🗀	\$
	Legal Fees		\$_1,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$ 0,/,000

	and total expenses furnished in response to Part C	fering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross	;	s /93,900
	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross art C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Purchase of real estate		S	\$
	Purchase, rental or leasing and installation of mand equipment	nachinery	□\$	□\$
		facilities	_	 -
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)		П \$	П\$
	•		_	
	Other (specify):		\$	\$
			\$	Π\$
			_	
			. 0	193,900
· .		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Comming accredited investor pursuant to paragraph (b)(2) of	e is filed under Ru ssion, upon writte	
SSI	uer (Print or Type)	Signature	Date	•
	me of Signer (Print or Type)	Title of Signer (Print or Type)		

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on For D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by this suer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniforly limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	ther has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigne thorized person.
•	Print or Type) Signature Language Print or Type) Signature Language Date Title (Print or Type)
_	
6	EORCH MATARAZZO ViR.

		nich ander State Sid Gastier Gast		AP	PENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana waiver	ification ate ULOF
State	Yes	No	·	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK						-			
AZ							1		
AR			•						
CA.	, · · · · · · · · · · · · · · · · · · ·								
СО									
СТ							_		
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN							_		
IA									
KS									
KY									
LA									
ME									
MD		Personal Property of the Prope							
MA									
MI									
MN									
MS									

				APP	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО								1	
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК									
OR	,								
PA		X	Common	1	195,000	Ø	6		X
RI									
sc									
SD									
TN									
TX									
UT									
VT									
VA									
WA		1							
WV					-	_			1
WI									

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

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